

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 87240  
District II  
811 South First, Artesia, NM 87210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103

Revised March 25, 1999

OIL CONSERVATION DIVISION

2040 South Pacheco  
Santa Fe, NM 87505

WELL API NO. <b>30-025-04539</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. <b>2616</b>
7. Lease Name or Unit Agreement Name: <b>EUNICE MONUMENT SOUTH UNIT</b>
8. Well No. <b>293</b>
9. Pool name or Wildcat <b>EUNICE MONUMENT; GRAYBURG-SAN ANDRES</b>

**SUNDRY NOTICES AND REPORTS ON WELLS**  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <b>INJECTOR</b>
2. Name of Operator <b>Chevron U.S.A. Inc.</b>
3. Address of Operator <b>P.O. Box 1150 Midland, TX 79702</b>
4. Well Location Unit Letter <b>H</b> : <b>1980</b> feet from the <b>NORTH</b> line and <b>660</b> feet from the <b>EAST</b> line Section <b>7</b> Township <b>21S</b> Range <b>36E</b> NMPM County <b>LEA</b>
10. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>3598'</b>

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

POH W/INJ EQPT. WASHED 3660'-3837'. DO SCALE 3837'-3847'. WASHED TO 3995'; TAGGED FILL.  
DO FILL 3995'-4032'. CIRC CLEAN. ACZD OH W/2000 GALS 15% & 2500 GALS 70Q. DUMPED 5000# SAND.  
TAGGED @ 3820'; WASHED TO 3855'. ACZD 3672'-3736' & OH TO 3855' W/1000 GALS 15%. POLYMER SQZD.  
PPD 100 SX CMT; 58 SX IN FORM. DO CMT TO 3680'. TSTD OLD SQZD PERFS 3672-76' 500# OK. DO CMT  
TO 3740'. CIRC CLEAN. TSTD POLY & CMT SQZ PERFS 3712-36'. DO CMT TO 3830'. TSTD OH SQZ. DO  
CMT TO 3870', FELL THRU. WASHED SAND TO 3945'. CIRC CLEAN. RIH W/TBG & INJ PKR TO 3693'. RAN  
MIT. RETURNED WELL TO INJECTION.

WORK PERFORMED 1/14/99 - 1/26/99

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE J. K. Ripley TITLE REGULATORY O.A. DATE 8/29/00

Type or print name J. K. RIPLEY Telephone No. (915) 687-7148

(This space for State use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Conditions of approval, if any: